

How Twitter check-ins help primary care doctors stay connected

JUL 16, 2021

Sara Berg, MS

Senior News Writer

Mounting productivity pressures have caused many primary care physicians to feel like cogs in a wheel while experiencing disconnection from colleagues and burnout. But when the COVID-19 pandemic hit, physicians felt the impact of isolation even more with physical distancing, rapid conversion to virtual education and widespread use of telehealth.

While these necessary measures enhanced health care capability and kept patients and doctors safer, they also exacerbated isolation. To overcome this, physicians from Johns Hopkins and other organizations turned to a Twitter-based discussion, Primary Care Chat.

“We built the @PrimaryCareChat handle to create a sense of belonging, mutual support for growth and celebration of the work primary care physicians do to combat these negative work factors and help to build a stronger primary care workforce,” said Indu Partha, MD, an internist at the University of Arizona College of Medicine in Tucson. She co-founded Primary Care Chat and detailed how it has helped its physician participants during a session at the International Conference on Physician Health.

“Our goal is deep dives into the art and joy of great adult primary care and the evidence behind it,” said Dr. Partha.

Launched in 2019 by a group of practicing and aspiring general internists and geriatricians, Primary Care Chat became invaluable during the pandemic. These Twitter chats occur every other Thursday from 9:30–10:30 p.m. Eastern time, and physicians join for a variety of reasons. For example, 10% join for professional networking while 26% are there for education and learning. But 63% say they join the Primary Care Chat to be part of a community.

Alternate topics each session

There are typically about 35–40 participants in the Primary Care Chat, with about 90 tweets that result in 500,000 Twitter impressions. This means that 500,000 people have seen the Tweets during this hour-long chat. Those views go up even more 24 hours after the chat has completed, reaching up to 1 million impressions a day later.

With each Twitter chat session, “since we maximize our participation, we have topics that alternate between practice-based knowledge topics and expert topics,” said AMA member Colleen Christmas, MD, associate professor of medicine and director of the primary care leadership track at Johns Hopkins University School of Medicine. Dr. Christmas is also a co-founder of the chat along with Dr. Partha, Megan Gerber, MD, Gabrielle Mayer, MD, and Stephanie Sison, MD.

For example, as the pandemic took in the spring of 2020, the chat included the following four questions:

- | What role are primary care physicians playing at your institution on the COVID front lines?
- | What is your approach to your outpatient panel?
- | How will—and should—the role of the primary care team evolve during this crisis and beyond?
- | What are you doing to take care of yourself?

Once the questions are created, “we schedule them to be posted at regular intervals,” explained Dr. Christmas. “During the chat, we encourage our participants to respond to these questions and embed their answers with #PrimaryCareChat to make it easier to follow along.”

Other topics have covered medical education and challenges in primary care as well as knowledge-based topics on managing sleep disorders, rheumatologic conditions, dermatology and LGBTQ+ care.

Assign roles to moderators

There is a core group of moderators, or co-hosts, such as Dr. Christmas or Dr. Partha who help lead the discussions.

“We, the moderators, come up with four different questions that we hone over the course of the two weeks,” said Dr. Christmas, adding that “the Primary Care Chat moderators have assigned roles, and several of us are involved in reacting to—and responding to—different participants and comments.”

Within the chat, moderators will also “pose other questions to deeply explore the concepts that evolve at the end of the chat,” she added, noting that the chat helps create a community while also providing accessible medical education.

A chat summary also is made available for those who are unable to attend live.